

Zero Suicide

Zero Suicide Approach

People who die by suicide are touching the health care system: 83% of those who die by suicide have seen a health care provider in the year before their death.¹ Only 29% of those who died in the past year were seen in outpatient behavioral health.²

The Zero Suicide framework is defined by a systemwide, organizational commitment to safer suicide care in health and behavioral health care systems.

Zero Suicide is a framework recommended by the Joint Commission to carry-out the new National Patient Safety Goal requirements effective July 1, 2019

Zero Suicide Framework

Lead system-wide culture change committed to reducing suicides

Train a competent, confident, and caring workforce

Identify patients with suicide risk via comprehensive screenings

Engage all individuals at-risk of suicide using a suicide care management plan

Treat suicidal thoughts and behaviors using evidence-based treatments

Transition individuals through care with warm hand-offs and supportive contacts

Improve policies and procedures through continuous quality improvement

For More information about

Zero Suicide, visit

<https://zerosuicide.sprc.org>

Staff Support and Training

Training is a key component of Zero Suicide because health professionals have regular contact with individuals at risk for suicide.¹ Studies show that many health professionals do not receive the training or have the confidence to effectively interact with suicidal individuals.³ Training should include:

- Screening and identification for all levels of staff that include risk factors, protective factors, warning signs, and early identification
- Internal policies and procedures for all levels of staff that outline role-specific training plans and competencies
- Assessing suicide risk, safety planning, suicide care management plans, continuity of care, referrals, and care transitions for health and behavioral health professionals

UHealth's Commitment

UHealth Northern Colorado Region was awarded a grant from the Colorado Department of Public Health & Environment to implement Zero Suicide in facilities in Larimer County. The first step is to complete a Zero Suicide Workforce Survey.

The Zero Suicide Workforce Survey is anonymous and there are no right or wrong answers. The results of the workforce survey will guide training initiatives and next steps.

1. Ahmedani, B. K., et al. (2014) Health care contacts in the year before suicide death. Journal of General Internal Medicine 29(6):870-7.

2. Luoma, et al. (2002) Contact with mental health and primary care providers before suicide: a review of the evidence. American Journal of Psychiatry 159(6): 909-916.

3. National Action Alliance for Suicide Prevention: Clinical Workforce Preparedness Task Force. (2014). Suicide Prevention and the Clinical Workforce: Guidelines for training. Washington, DC.

To contact the north region
Zero Suicide Implementation
Team, send email to:

Zero_Suicide@uhealth.org

UHealth Workforce Survey

- To access:
<http://www.surveygizmo.com/s3/5297599/uchlcswfs>
- Choose location (MCR/PVH)
- Choose Department
 - Departments with fewer staff are not listed in order to protect anonymity. Select "other" if your department is not listed
- Complete in 1 sitting
- Takes 10-15 minutes
- Anonymous

Local Mental Health Help

UHealth Real Help Hotline	833-533-2428
UHealth Mountain Crest Crisis Assessment Center	970-495-8090
Summitstone Crisis Line	970-494-4200
Colorado Crisis Line	844-493-8255